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Bib Data Sheet

CONFIRMATION NO. 7630

SERIAL NUMBER 10/765,202	FILING DATE 01/28/2004 RULE	CLASS 375	GROUP ART UNIT 2634	ATTORNEY DOCKET NO. 58010-00602
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/443,655 01/30/2003

CP

** FOREIGN APPLICATIONS *****

N/A

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 06/08/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 19	TOTAL CLAIMS 88	INDEPENDENT CLAIMS 9
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

25243

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TITLE

Sub-symbol parallel interference cancellation

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)